

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2016 JUL 21 AM 10:28

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

MUNOZ GROUP PAC

ADDRESS (number and street)

P O B O X 2 1 9 1

Check if different  
than previously  
reported. (ACC)

R O U N D R O C K

T X

7 8 6 8 0 2 1 9 1

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 0 0 5 5 8 0 4 9

3. IS THIS  
REPORT

NEW  
(N)

OR

X

AMENDED  
(A)

4. TYPE OF REPORT  
(Choose One)

(b) Monthly  
Report  
Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(a) Quarterly Reports:

X

April 15  
Quarterly Report (Q1)

July 15  
Quarterly Report (Q2)

October 15  
Quarterly Report (Q3)

January 31  
Year-End Report (YE)

July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)

Termination Report  
(TER)

(c) 12-Day  
PRE-Election  
Report for the:

Primary (12P)

Convention (12C)

General (12G)

Special (12S)

Runoff (12R)

(d) 30-Day

POST-Election  
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the  
State of

Election on

in the  
State of

5. Covering Period

0 1

0 1

2 0 1 5

through

0 3

3 1

2 0 1 5

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

ENRIQUE MUNOZ

Signature of Treasurer

*Enrique Munoz*

Date

0 7

1 5

2 0 1 6

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**MUNOZ GROUP PAC**

Report Covering the Period: From: **0 1 0 1 2 0 1 5** To: **0 3 3 1 2 0 1 5**

	<b>COLUMN A This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
6. (a) Cash on Hand January 1, <b>2 0 1 5</b>		<b>1 1 6 9 4</b>
(b) Cash on Hand at Beginning of Reporting Period.....	<b>1 1 6 9 4</b>	
(c) Total Receipts (from Line 19).....	<b>0 0 0</b>	<b>0 0 0</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<b>1 1 6 9 4</b>	<b>1 1 6 9 4</b>
7. Total Disbursements (from Line 31).....	<b>0 0 0</b>	<b>0 0 0</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<b>1 1 6 9 4</b>	<b>1 1 6 9 4</b>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<b>3 1 7 0 0 0</b>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**MUNOZ GROUP PAC**

Report Covering the Period:

From:

**0 1 0 1 2 0 1 5**

To:

**0 3 3 1 2 0 1 5**

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

**11. Contributions (other than loans) From:**

**(a) Individuals/Persons Other**

Than Political Committees

**(i) Itemized (use Schedule A).....**

**(ii) Unitemized .....**

**(iii) TOTAL (add**

Lines 11(a)(i) and (ii)..... ►

**(b) Political Party Committees .....**

**(c) Other Political Committees**

(such as PACs).....

**(d) Total Contributions (add Lines**

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

**12. Transfers From Affiliated/Other**

Party Committees.....

**13. All Loans Received .....**

**14. Loan Repayments Received.....**

**15. Offsets To Operating Expenditures**

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

**16. Refunds of Contributions Made**

to Federal Candidates and Other

Political Committees.....

**17. Other Federal Receipts**

(Dividends, Interest, etc.).....

**18. Transfers from Non-Federal and Levin Funds**

**(a) Non-Federal Account**

(from Schedule H3).....

**(b) Levin Funds (from Schedule H5) .....**

**(c) Total Transfers (add 18(a) and 18(b))..**

**19. Total Receipts (add Lines 11(d),**

12, 13, 14, 15, 16, 17, and 18(c)) .....

**0 0 0**

**0 0 0**

**20. Total Federal Receipts**

(subtract Line 18(c) from Line 19) .....

**0 0 0**

**0 0 0**

# **DETAILED SUMMARY PAGE** of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0 0 0	0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0 0 0	0 0 0

## Page 5

## LOANS

PAGE 1 OF 1

FOR LINE 13 OF FORM 3X

MUNOZ GROUP PAC

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <div style="text-align: center; font-weight: bold;">ENRIQUE MUNOZ</div>		<b>Election:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Mailing Address <div style="text-align: center; font-weight: bold;">PO BOX 2191</div>			
City <b>ROUND ROCK</b> State <b>TX</b> ZIP Code <b>78680-2191</b>			
Original Amount of Loan <div style="text-align: center; font-weight: bold;">4 6 7 0 0 0</div>		Cumulative Payment To Date <div style="text-align: center; font-weight: bold;">1 5 0 0 0 0</div>	
Balance Outstanding at Close of This Period <div style="text-align: right; font-weight: bold;">3 1 7 0 0 0</div>			
<b>TERMS</b>			
Date Incurred		Date Due	
<div style="text-align: center; font-weight: bold;">0 1 0 1 2 0 1 4 0 1 0 1</div>		<div style="text-align: center; font-weight: bold;">2 0 1 8</div>	
Interest Rate		Secured:	
<div style="text-align: center; font-weight: bold;">2.94 % (apr)</div>		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
List All Endorsers or Guarantors (if any) to Loan Source			
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZIP Code		Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZIP Code		Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZIP Code		Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State ZIP Code		Amount Guaranteed Outstanding:	
<b>SUBTOTALS</b> This Period This Page (optional)..... ▶		3 1 7 0 0 0	
<b>TOTALS</b> This Period (last page in this line only)..... ▶		3 1 7 0 0 0	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input checked="" type="checkbox"/> USPS Priority Mail	Postmarked 7/16/2016
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
PREPARER <i>MP</i>	7/21/2016 DATE PREPARED

2019-01-04 00:00:00